

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KS	10872	
O.I.P.E. CLASSIFIER		21	10/27/98
FORMALITY REVIEW	AM	72225	11/5/98

INDEX OF CLAIMS

Rejected \_\_\_\_\_ IN \_\_\_\_\_ Non-elected  
 Allowed \_\_\_\_\_ I \_\_\_\_\_ Interference  
 (Through numeral) Canceled \_\_\_\_\_ A \_\_\_\_\_ Appeal  
 Restricted \_\_\_\_\_ O \_\_\_\_\_ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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